

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100974544  
 06-09-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**Danielle Garbe Reser (Friends Of Danielle Garbe Reser)**

Mailing Address  
**PO Box 3297**

City: **Walla Walla, WA** Zip + 4: **99362** Office Sought (candidates): **STATE SENATOR** Election Date: **2020**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous .....		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L .....		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation .....		
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
05/27/20	Jacqueline Sandberg 1702 S Koren Rd Spokane, WA 99212	Alliant Insurance Services Spokane, WA Occupation Acct Mgr	X		\$50.00	\$275.00
05/27/20	Jeanette Lightfoot 1831 Reser Rd Walla Walla, WA 99362	Occupation	X		\$60.00	\$60.00
05/27/20	Cynthia Widmer 78 Southeast Rodeo Loop College Place, WA 99324	Occupation	X		\$32.00	\$56.00
05/27/20	Ted Cox 159 Coyote Ridge Dr Walla Walla, WA 99362	Not Employed ,	X		\$25.00	\$175.00
05/27/20	Linda Herbert 621 Pleasant St. Walla Walla, WA 99362	Not Employed ,	X		\$60.00	\$487.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$227.00	*See reverse for details.
		Amount from attached pages			\$204.00	
3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.					\$431.00	

4. Date of Deposit: **05/27/20**

Treasurer's Daytime Telephone No.: **(206)745-2010**

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature: **Jason Bennett** Date: **06-09-2020**

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) <b>Danielle Garbe Reser (Friends Of Danielle Garbe Reser)</b>	Deposit Date <b>05/27/20</b>
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2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100:* Employer's Name, City and State	P R I	G E N	Amount	Aggregate Total*
05/27/20	Ruth Kagi 13504 8th NW Seattle, WA 98177	Washington State Seattle, WA  Occupation <u>State Representative</u>	X		\$100.00	\$300.00
05/27/20	Michelle Lenihan 1105 E Capitol St SE #2 Washington, DC 20003	  Occupation	X		\$100.00	\$100.00
05/27/20	Cynthia Widmer 78 Southeast Rodeo Loop College Place, WA 99324	  Occupation	X		\$4.00	\$56.00
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